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AUTHOR Hyson, Marion C.
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ABSTRACT

This ERIC digest: (1) describes types and manifestations of shyness among children; (2) briefly reviews research on genetic, temperamental, and environmental influences on shyness; (3) distinguishes between normal and problematic shyness; and (4) suggests ways for parents and teachers to help the shy child by accepting the whole child, building the child's self-esteem, developing children's social skills, and allowing shy children to warm up to new situations. (RH)

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ERIC Clearinghouse on Elementary and Early Childhood Education
University of Illinois
805 West Pennsylvania Avenue
Urbana, Illinois 61801
(217) 333-1386

ERIC Digest

The Shy Child

Marion C. Hyson

Shyness is a common but little understood emotion. Everyone has felt ambivalent or self-conscious in new social situations. However, at times shyness may interfere with optimal social development and restrict children's learning. This digest (1) describes types and manifestations of shyness, (2) reviews research on genetic, temperamental, and environmental influences on shyness, (3) distinguishes between normal and problematic shyness, and (4) suggests ways to help the shy child.

What Is Shyness?

The basic feeling of shyness is universal, and may have evolved as an adaptive mechanism used to help individuals cope with novel social stimuli. Shyness is felt as a mix of emotions, including fear and interest, tension and pleasantness. Increases in heart rate and blood pressure may occur. An observer recognizes shyness by an averted, downward gaze and physical and verbal reticence. The shy person's speech is often soft, tremulous, or hesitant. Younger children may suck their thumbs; some act coy, alternately smiling and pulling away (Izard and Hyson, 1986).

Shyness is distinguishable from two related behavior patterns: wariness and social disengagement. Infant wariness of strangers lacks the ambivalent approach/avoidance quality that characterizes shyness. Some older children may prefer solitary play and appear to have low needs for social interaction, but experience none of the tension of the genuinely shy child.

Children may be vulnerable to shyness at particular developmental points. Fearful shyness in response to new adults emerges in infancy. Cognitive advances in self-awareness bring greater social sensitivity in the second year. Self-conscious shyness—the possibility of embarrassment—appears at 4 or 5. Early adolescence ushers in a peak of self-consciousness (Buss, 1986).

What Situations Make Children Feel Shy?

New social encounters are the most frequent causes of shyness, especially if the shy person feels herself to be the focus of attention. An "epidemic of shyness" (Zimbardo and Radl, 1981) has been attributed to the rapidly changing social environment and competitive pressures of school and work with which 1980s children and adults must cope. Adults who constantly call attention to what others think of the child, or who allow the child little autonomy, may encourage feelings of shyness.

Why Are Some Children More Shy Than Others?

Some children are dispositionally shy: they are more likely than other children to react to new social situations with shy behavior. Even these children, however, may show shyness only in certain kinds of social encounters. Researchers have implicated both nurture and nature in these individual differences.

Some aspects of shyness are learned. Children's cultural background and family environment offer models of social behavior. Chinese children in day care have been found to be more socially reticent than Caucasians, and Swedish children report more social discomfort than Americans. Some parents, by labeling their children as shy, appear to encourage a self-fulfilling prophecy. Adults may cajole coyly shy children into social interaction, thus reinforcing shy behavior (Zimbardo and Radl, 1981).

There is growing evidence of a hereditary or temperamental basis for some variations of dispositional shyness. In fact, heredity may play a larger part in shyness than in any other personality trait (Daniels and Plomin, 1985). Adoption studies can predict shyness in adopted children from the biological mother's sociability. Extremely inhibited children show physiological differences from uninhibited children, including higher and more stable heart rates. From ages 2 to 5, the most inhibited children continue to show reticent behavior with new peers and adults (Reznick and others, 1986). Patterns of social passivity or inhibition are remarkably consistent in longitudinal studies of personality development.

Despite this evidence, most researchers emphasize that genetic influences probably account for only a small proportion of self-labeled shyness. Even hereditary predispositions can be modified. Adopted children do acquire some of the adoptive parents' social styles (Daniels and Plomin, 1985), and extremely inhibited

PS 017394

toddlers sometimes become more socially comfortable through their parents' efforts (Reznick and others, 1986).

When Is Shyness a Problem?

Shyness can be a normal, adaptive response to potentially overwhelming social experience. By being somewhat shy, children can withdraw temporarily and gain a sense of control. Generally, as children gain experience with unfamiliar people, shyness wanes. In the absence of other difficulties, shy children have not been found to be significantly at-risk for psychiatric or behavior problems (Honig, 1987). In contrast, children who exhibit extreme shyness which is neither context-specific nor transient may be at some risk. Such children may lack social skills or have poor self-images (Sarafino, 1986). Shy children have been found to be less competent at initiating play with peers. School-age children who rate themselves as shy tend to like themselves less and consider themselves less friendly and more passive than their non-shy peers (Zimbardo and Radl, 1981). Such factors negatively affect others' perceptions. Zimbardo reports that shy people are often judged by peers to be less friendly and likeable than non-shy people. For all these reasons, shy children may be neglected by peers, and have few chances to develop social skills. Children who continue to be excessively shy into adolescence and adulthood describe themselves as being more lonely, and having fewer close friends and relationships with members of the opposite sex, than their peers.

Strategies for Helping a Shy Child

1. *Know and Accept the Whole Child.* Being sensitive to the child's interests and feelings will allow you to build a relationship with the child and show that you respect the child. This can make the child more confident and less inhibited.
2. *Build Self-esteem.* Shy children may have negative self-images and feel that they will not be accepted. Reinforce shy children for demonstrating skills and encourage their autonomy. Praise them often. "Children who feel good about themselves are not likely to be shy" (Sarafino, 1986, p. 191).
3. *Develop Social Skills.* Reinforce shy children for social behavior, even if it is only parallel play. Honig (1987) recommends teaching children "social skill words" ("Can I play, too?") and role playing social entry techniques. Also, opportunities for play with young children in one-on-one situations may allow shy children to become more assertive (Furman, Rahe, and Hartup, 1979). Play with new groups of peers permits shy children to make a fresh start and achieve a higher peer status.
4. *Allow the Shy Child to Warm Up to New Situations.* Pushing a child into a situation which he or she sees as threatening is not likely to help the child build social skills. Help the child feel secure and provide interesting materials to lure him or her into social interactions (Honig, 1987).
5. *Remember That Shyness Is Not All Bad.* Not every child needs to be the focus of attention. Some qualities of shyness, such as modesty and reserve, are viewed as positive (Jones, Cheek, and Briggs, 1986). As long as a child does not seem excessively uncomfortable or neglected around others, drastic interventions are not necessary.

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